



# Work Order (Bid Form)

## WORK ORDER INFORMATION

**Work Order Name:** 14014SO0836

**Work Order Type:** Weatherization

**Audit Name:** 14014SO0836

## CLIENT INFORMATION

**Client Name:**

**Address:**

**Client ID:** 14014SO0836

LEWISBURG, TN 37034

**Alt. Client ID:** MARSHALL

## AGENCY INFORMATION

**Agency:** SOUTH CENTRAL HUMAN RESOURCE AGENCY

**Agency Phone:** (931) 433-7182

**Address:** 1437 WINCHESTER HIGHWAY  
FAYETTEVILLE, TN 37334-2001

**Fax:** (931) 438-0074

**Email Address:** e.satterfield@schra.us

**Company Name & License Number:** \_\_\_\_\_

**Contractor's Signature:** \_\_\_\_\_

## COMMENT

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**Report Run On:** 5/14/2010

**DOE Weatherization Assistant**

**Version 8.5.0**

**Page 1 of 7**

## Measures

### Measure 1 General Air Sealing

### Components

Inspected

- Comment** 1. REDUCE AIR INFILTRATION BY 1023 CFM'S / SEAL DUCT WORK  
USING MASTIC AT REGISTERS AND RETURN - REGISTERS TO READ 1.0  
OR LESS  
2. REPLACE MISSING INSULATION AND BELLBOARD AFTER DUCT  
SEALING  
3. SEAL AROUND WHERE ADDITION MEETS TRAILER AND ANY OTHER  
AREA OF INFILTRATION  
4. W/S AND D/S SIDE DOOR

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Miscellaneous Supplies	Infiltration Reduction	Each	1					
2	Labor	LABOR	Hour						
Other Detail									
Measure Sub Total:							Sub Total:		

Field Notes:

### Measure 2 WINDOW

### Components

Inspected

- Comment** REPLACE MIDDLE WINDOW ON EAST SIDE

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Windows	REPLACEMENT WINDOW	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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DOE Weatherization Assistant

Version 8.5.0

Page 2 of 7

**Measure 3 DOORS****Components****Inspected****Comment** REPLACE DOOR TO ADDITION☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Doors	REPLACEMENT DOOR	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Other Detail</b>									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Measure Sub Total:</b>						<input type="text"/>	<b>Sub Total:</b>	<input type="text"/>	

**Field Notes:****Measure 4 BASELOADS****Components****Inspected****Comment** 1. REPLACE REFRIGERATOR  
2. WRAP TANK / INSULATE HOT AND COLD PIPES☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Refrigerators	REPLACEMENT REFRIGERATOR	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Hot Water Equipment	WRAP TANK	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Hot Water Equipment	INSULATE LINES	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Other Detail</b>									
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Measure Sub Total:</b>						<input type="text"/>	<b>Sub Total:</b>	<input type="text"/>	

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Work Order Name: 14014SO0836

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DOE Weatherization Assistant

Version 8.5.0

Page 3 of 7

**Measure 5 Fix Improper Venting (Clothes Dryer)****Components****Inspected****Comment** CHANGE TO METAL FLEX AND INSTALL DAMPER☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Metal Flex	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:****Sub Total:****Field Notes:**

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DOE Weatherization Assistant

Version 8.5.0

Page 4 of 7

**Measure 6 Fix Wiring Problems  
(Basement/Crawlspace)**

**Components**

**Inspected**

**Comment** 1. INSTALL 2 WALL RECEPTICALS IN LVROOM - REPAIR WALL AROUND ONE  
2. REPLACE THERMOSTAT / SERVICE UNIT

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	WALL OUTLET	Each	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Heating Equipment	REPLACEMENT THERMOSTAT	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Heating Equipment	SERVICE UNIT	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Labor	LABOR	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:**

**Sub Total:**

**Field Notes:**

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DOE Weatherization Assistant

Version 8.5.0

Page 5 of 7

<b>Measure 7 PressureRelief Piping Needed</b>				<b>Components</b>				<b>Inspected</b>	
<b>Comment</b>									
				<b>Estimated</b>		<b>Actual</b>			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Pressure relief piping	Each	1					
2	Labor	Labor	Hour	1					
<b>Other Detail</b>									
<b>Measure Sub Total:</b>							<b>Sub Total:</b>		
<b>Field Notes:</b>									

<b>Measure 8 Smoke Detector is Needed</b>				<b>Components</b>				<b>Inspected</b>	
<b>Comment</b>									
				<b>Estimated</b>		<b>Actual</b>			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Smoke / Carbon detector	Each	1					
2	Labor	Labor	Hour	1					
<b>Other Detail</b>									
<b>Measure Sub Total:</b>							<b>Sub Total:</b>		
<b>Field Notes:</b>									

**Measure 9 Vapor Barrier Needed  
(Basement/Crawlspace)****Components****Inspected****Comment**

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	Basement / crawlspace vapor barrier	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Other Detail**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Measure Sub Total:****Sub Total:****Field Notes:****Work Order Grand Total:****Grand Total:**

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Page 7 of 7